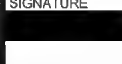



1 DATE OF INCIDENT <b>01-JUL-2017</b>		TIME <b>22:51:00</b>		2 ADDRESS OF OCCURRENCE <b>2237 S KOSTNER AVE CHICAGO, IL 60623</b>		3 LOCATION CODE <b>291</b>		4 BEAT/OCCUR <b>1013</b>		5 VIDEO RECORDED INCIDENT X 01 BWC 02 IN-CAR CAMERA 03 OTHER REPT VIDEO							
6 POSITION <b>9161</b>		7 LAST NAME <b>COJOCNEAN</b>		8 FIRST NAME <b>DAN M</b>		9 STAR NO. <b>15003</b>		10 SEX X 01 M 02 F <b>WHI</b>		11 RACE CODE <b>WHI</b>		12 AGE <b>511</b>		13 HT. <b>175</b>			
15 DATE OF APPT <b>02-FEB-2015</b>		16 EMPLOYEE NO <b>[REDACTED]</b>		17 UNIT & BEAT OF ASSIGNMENT <b>010 1065B</b>		18 DUTY STATUS X 01 On 02 Off <b>01 Yes</b>		19 MEMBER INJURED? X 01 Yes 02 No <b>01 Yes</b>		20 MEMBER IN UNIFORM? X 01 Yes 02 No <b>01 Yes</b>							
21 LAST NAME <b>LOCKE</b>		22 FIRST NAME <b>QUENTICA</b>		23 M.I.		24 SEX X 01 M 02 F <b>BLK</b>		25 RACE <b>BLK</b>		26 D.O.B <b>27-AUG-1980</b>		27 HT.		28 WT.			
29 ADDRESS <b>CHICAGO, IL</b>		30 TELEPHONE NO.		31 WAS SUBJECT ARMED? X 01 Yes 02 No <b>01 Yes</b>		FIREARM - RIFLE FIREARM - SEMI-AUTOMATIC		32 SUBJECT INJURED BY MEMBER? X 01 Yes 02 No <b>01 Yes</b>		33 SUBJECT ALLEGED INJURY BY MEMBER? 01 Yes X 02 No <b>02 No</b>							
34 IF SUBJECT INJURED, DESCRIBE INJURY X 01 Fatal 02 Non-Fatal - Major Injury 03 Non-Fatal - Minor Injury 04 Non-Apparent/None		35 WHERE WAS MEDICAL TREATMENT OBTAINED? <b>MOUNT SINAI HOSPITAL</b>		36 BY WHOM?		37 CONDITION X 01 Apparently Normal 02 Under Influence 03 Hospitalized 04 Not Hospitalized 05 Refused Medical Aid											
38 CHARGES PLACED		DNA		39 CB NO.		IR NO.		DNA									
40 PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE									
SUBJECT'S ACTIONS DID NOT FOLLOW VERBAL DIRECTION X STIFFENED (DEAD WEIGHT) OTHER		FLED X PULLED AWAY OTHER		IMMINENT THREAT OF BATTERY X OTHER PERCEIVED AS		ATTACK WITH WEAPON ATTACK WITHOUT WEAPON OTHER		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM X WEAPON X OTHER PERCEIVED AS									
MEMBER'S RESPONSE MEMBER PRESENCE X VERBAL COMMANDS X ESCORT HOLDS WRISTLOCK ARMBAR PRESSURE SENSITIVE AREAS CONTROL INSTRUMENT OC/CHEMICAL WEAPON W/AUTHORIZATION LRAD WITH AUTHORIZATION OTHER		OPEN HAND STRIKE TAKE DOWN / EMERGENCY HANDCUFFING OC CHEMICAL WEAPON CANINE TASER (Probe Discharge) 01 02 03 TASER (Contact Stun) 01 02 03 TASER (ARC Cycle) 01 02 03 TASER (Spark Displayed) 01 02 03 OTHER		ELBOW STRIKE CLOSED HAND STRIKE/PUNCH IMPACT WEAPON (Describe in Box 40) OTHER		KNEE STRIKE KICKS IMPACT MUNITION (Describe in Box 40)		FIREARM X OTHER									
41 *OC/CHEMICAL WEAPON AUTHORIZED BY (NAME)		RANK		STAR NO.		UNIT NO.		42 DID THE INVOLVED MEMBER DISCHARGE A WEAPON ONLY TO DESTROY OR DETER AN ANIMAL? 01 Yes X 02 No									
43 WAS THIS AN ACCIDENTAL DISCHARGE IN THE CONTEXT OF A NON-CRIMINAL INCIDENT? 01 Yes X 02 No		44 DID THIS WEAPON CONTRIBUTE TO A SUBJECT INJURY X 01 Yes 02 No		45 DID THE DISCHARGE RESULT IN A SELF-INFLICTED INJURY? X 01 No X 02 Yes - Subject 03 Yes - Member													
46 WEAPON TYPE X 01 REVOLVER 04 SEMI-AUTO PISTOL 02 RIFLE 05 CHEMICAL WEAPON 03 SHOTGUN 06 TASER (Probe Discharge) 07 OTHER		47 INCIDENT OCCURRED Indoors X Outdoors		48 LIGHTING CONDITIONS X 01 Daylight 02 Night 03 Dawn 04 Dusk 05 Poor Artificial 06 Good Artificial		49 WEATHER CONDITIONS <b>CLEAR</b>											
50 MAKE/MANUFACTURER GLOCK, INC.-AU-		51 MODEL <b>17</b>		52 BARREL LENGTH <b>4.5</b>		53 CALIBER/GAUGE <b>9 MM</b>											
54 TASER DART ID NO		55 WEAPON SERIAL NO. (Include Letters) <b>YRK053</b>		56 CHICAGO GUN REG. NO. <b>R036377S</b>		57 IL FIREARM OWNER ID NO. <b>14670678</b>		58 HANDGUN CERTIFICATE NO									
59 SPECIAL WEAPON CERTIFICATE NO		60 PROPERTY INVENTORY NO		61 TYPE OF AMMUNITION USED <b>Department Issued</b>		62 NO. OF WEAPONS DISCHARGED BY THIS MEMBER. <b>1</b>		63 TOTAL NO. OF SHOTS MEMBER FIRED <b>8</b>									
64 WHO FIRED FIRST SHOT X 01 MEMBER 02 OFFENDER 03 OTHER (SPECIFY)		65 WAS FIREARM RELOADED DURING INCIDENT 01 YES X 02 NO		66 NO OF CARTRIDGES/SHOT SHELLS RELOADED		67 HOW WAS MEMBER'S HANDGUN WORN X 01 RT SIDE (WAIST) 02 LT. SIDE (WAIST) 03 OTHER (Specify)											
68 HOW WAS MEMBER'S HANDGUN DRAWN X 01 STRONG SIDE DRAW 02 CROSS DRAW 03 OTHER (Specify)		69 SPECIFY METHOD/EQUIPMENT USED TO RELOAD		70 DID MEMBER USE SIGHTS 01 YES X 02 NO													
71 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DODRWAYS, CAR, FURNITURE, ETC) <b>NONE</b>		72 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED 01 0 - 5 FT X 02 5 - 10 FT 03 10 - 15 FT 04 OVER 15 FT.															
73 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON X 01 SUBJECT 03 ANIMAL 05 SUBJECT & OTHER CATEGORY 07 NONE X 02 OTHER PERSON 04 OBJECT 06 UNKNOWN 08 ANY OTHER COMBINATION		74 POSITION OF MEMBER DISCHARGING WEAPON 01 STANDING 02 LYING DOWN 03 SITTING 04 KNEELING X 05 OTHER (SPECIFY) ON FENCE															

INFORMATION	77. NOTIFICATIONS (ALL INCIDENTS' _____ IMMEDIATE SUPERVISOR _____ DSS OF DISTRICT OF OCCURRENCE NOTIFICATIONS (TASER, OC SPRAY, OTHER CHEMICAL WEAPONS INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> CPIC NOTIFICATIONS (USE OF DEADLY FORCE, FIREARM, IMPACT MUNITIONS, LRAD, CANINE INCIDENT): <input checked="" type="checkbox"/> OEMC Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.			75. EVENT NO.  <b>1718219168</b>
	78. ADDITIONAL INFORMATION <b>ASSAILANT ARMED WITH A RIFLE AND SEMI-AUTO HANDGUN.          PRELIMINARY INVESTIGATION REVEALED 8 SPENT CASINGS DISCHARGED FROM OFFICER'S WEAPON.</b>			
SIGNATURES	79. REPORTING MEMBER (Print Name) <b>COJOCNEAN, DAN M</b> <b>02-JUL-2017 06:13:41</b>		STAR/EMPLOYEE NO. <b>15003</b> 	76. R.D. NO.  <b>JA330884</b>
	Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.			
	80. REVIEWING SUPERVISOR (Print Name) <b>ONESTO, MICHAEL J</b>	STAR NO <b>1739</b>	SIGNATURE 	DATE REVIEWED      TIME <b>02-JUL-2017 06:37:53</b>

## LIEUTENANT OR ABOVE/INCIDENT COMMANDER REVIEW

FOR REPORTABLE USE OF FORCE INCIDENTS, THE FOLLOWING RANKED SUPERVISOR WILL BE RESPONSIBLE FOR REVIEW AND APPROVAL OF ALL TRRS FROM THE SAME INCIDENT: 1. THE EXEMPT-LEVEL INCIDENT COMMANDER WILL REVIEW AND APPROVE THE FOLLOWING TYPES OF INCIDENTS: (A) THE DISCHARGE OF IMPACT MUNITIONS OR A FIREARM BY A DEPARTMENT MEMBER, EXCLUDING UNINTENTIONAL DISCHARGES WITH NO INJURY AND DISCHARGES TO DESTROY AN ANIMAL (B) A MEMBER'S USE OF FORCE, BY WHATEVER MEANS, THAT RESULTS IN THE DEATH OR INJURIES LIKELY TO CAUSE DEATH OF ANY INDIVIDUAL (C) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT IN WHICH ANOTHER MEMBER USED FORCE AS STATED ABOVE. 2. THE ASSIGNED DISTRICT OF OCCURRENCE MEMBER THE RANK OF CAPTAIN OR ABOVE WILL REVIEW AND APPROVE TRRS FOR THE FOLLOWING INCIDENTS: (A) THE DESTRUCTION OF AN ANIMAL WITH NO HUMAN INJURY (B) AN ACCIDENTAL WEAPONS DISCHARGE WITH NO INJURY (C) ANY INCIDENT NORMALLY INVESTIGATED BY A LIEUTENANT WHERE A LIEUTENANT IN THE DISTRICT OF OCCURRENCE IS NOT AVAILABLE. (3) THE ASSIGNED DISTRICT OF OCCURRENCE MEMBER THE RANK OF LIEUTENANT WILL INVESTIGATE ALL OTHER INCIDENTS

### 81. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☒ DNA

☐ REFUSED

☐ INTERVIEW NOT CONDUCTED (Specify Reason)

Offender succumbed to his injuries.

### 82. LIEUTENANT OR ABOVE/INCIDENT COMMANDER: COMMENTS

U#17-014 IPRA personnel on scene. The member's vehicle does not have an ICC system. The Reporting Deputy reviewed appropriate, available BWC's which included the above member's BWC. The member responded to a call of Shots Fired, Man with a Gun at the listed address. The member proceeded to the rear of the location via the South gangway on foot. While in the gangway the member heard a voice from inside the residence state in essence, not verbatim, "grab the guns and go". Upon climbing a fence leading to the rear yard the member encountered the armed offender who turned in the direction of the member. The member discharged his weapon in defense of self and his partner. An assault rifle and a semi-automatic handgun were recovered in immediate proximity to the offender. Based upon the available evidence at this time it is the preliminary determination of the Undersigned that the member acted within Departmental guidelines.

### 83. LIEUTENANT OR ABOVE/INCIDENT COMMANDER USE ONLY

☒ I HAVE REVIEWED THIS TRR AND COMPLIED WITH THE DUTIES OUTLINED IN G03-02-05.

### 84. LIEUTENANT OR ABOVE/INCIDENT COMMANDER DETERMINATION

☒ INDEPENDENT POLICE REVIEW AUTHORITY (IPRA) NOTIFIED

☐ LOG NO. 1085782 OBTAINED

### 85. LIEUTENANT OR ABOVE/INCIDENT COMMANDER (Print Name)

**O DONNELL, JAMES C**

86

TRR \_\_\_\_\_ DF \_\_\_\_\_ TRR(S)

### 87. DISTRIBUTION OF TRR:

IF A PAPER TRR WAS COMPLETED DUE TO AN UNAVAILABILITY OF THE AUTOMATED TACTICAL RESPONSE REPORT APPLICATION:

1. THE ORIGINAL TRR WILL BE FORWARDED TO DIRECTOR, RECORDS DIVISION - TO BE INCLUDED WITH THE CORRESPONDING CASE FILE.

2. A COPY OF THE PAPER TRR WILL BE FORWARDED TO:

A. INDEPENDENT POLICE REVIEW AUTHORITY, AND

B. COMMANDER, INFORMATION SERVICES DIVISION, TO ENSURE DATA ENTRY INTO THE AUTOMATED TACTICAL RESPONSE REPORT APPLICATION

SIGNATURE

DATE COMPLETED TIME

**02-JUL-2017 06:59:04**